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ABSTRACT

Project LINC (Living Independently through Neighborhood Cooperation) was a three year demonstration project designed to enable older people to remain in independent living by strengthening their neighborhood-based informal support systems. To determine if LINC met its goals and reached the elderly population it was designed for, a pre- and post-project evaluation was completed. A correlated t test measured changes in 101 respondents' perceptions over a 6-month period. The project's intergenerational focus was reflected in the age distribution of respondents, ranging from 22 to 91 (75% were over 60). Almost half of the elderly described themselves as being in fair to poor health. Results showed that LINC increased opportunities for socialization and stimulated the exchange of services among neighbors, contributing to an increase in reported life satisfaction. These gains were most notable for the more vulnerable elderly and those in poorer health. A series of eleven tables was included, giving demographic information and a summary of responses to the interview questionnaire. (JAC)

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EFFECTIVENESS OF A NEIGHBORHOOD BASED INFORMAL SUPPORT SYSTEM

by

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Project LINC, which stands for Living Independently through Neighborhood Cooperation, was a three year demonstration project. The overall goal of the project was to enable older people to remain in independent living for as long as feasible by strengthening their neighborhood based informal support systems. The project was built around four major components: intergenerational neighborhood networks; an exchange bank of services and skills; community based volunteers; and co-sponsorship with a Senior Center. During its existence, LINC organized neighborhood-wide meetings, block by block networks, peer support groups, and intergenerational helping teams. Services were provided by residents of all ages, as well as by LINC's volunteer and professional staff. Co-sponsorship with the Senior Center not only provided an immediate link to the formal services system, but ensured the project's continuation, as well as its expansion to neighboring communities.

The evaluation was designed to answer the following questions:

1. Did LINC reach the population it intended to serve?
2. Did participants develop a more positive perception of their neighborhood during the course of their participation in LINC?
3. Did involvement in LINC increase participants' neighbor and friendship networks?
4. Did involvement in LINC increase exchange of services among neighbors?
5. Did involvement in LINC increase participants' life satisfaction?

In my remarks today, I will briefly review the methodology used and then discuss the findings based on the questions I referred to.

Methodology

A pre-post-test design was used to evaluate the project's impact on participants. The sampling frame consisted of everyone who joined LINC between June 1980, when the project first began operating, and December 1981. Every other person included in the sampling frame was eligible to be interviewed. Of 289 registered LINC members, 144 were eligible, and 120 agreed to be interviewed.

Pre-test interviews began in April 1981 and were completed by December. The post-test was scheduled so that a minimum of six months elapsed between interviews. The post-test interviews were administered to 101 LINC members between February 1982 and June 1982. Nineteen persons were not re-interviewed because: they were not interested; moved out of the area or to congregate facilities; or were too ill; or had died.

A correlated t test was used to measure changes in respondent's perceptions over time. A .05 level of significance, using a one tail test, was selected. In my remarks I will be referring only to some of the data presented in the tables that were distributed.

Findings

The first question to be answered was: DID LINC REACH ITS INTENDED TARGET POPULATION?

LINC was designed to stimulate the development of helping networks among neighbors in both single and multiple family dwellings. Fifty-eight percent of the respondents lived in apartments, as opposed to 42% who lived in their own homes.

The project's intergenerational focus was reflected in the age distribution of respondents, which ranged from 22 to 91 years of age. One fourth were under 60; 40% were between 60 and 74; and 35% were 75 and older.

Table 1 shows that the younger respondents--those under 60--were predominantly white, married women who lived with at least one other person. The majority had some college education and were employed in professional, managerial or white collar positions. The older respondents--those 60 and over--were also predominantly women, but in contrast to the younger respondents, tended to be widowed and live alone. The majority did not have more than a high school education, and as would be expected, most were retired or had been homemakers.

LINC was designed to reach the frail elderly. As Table 2 indicates, on the pre-test, almost half of the elderly respondents described themselves as being in fair to very poor health. Approximately one-fourth indicated that in comparison to a year ago, they were not managing as well. Nonetheless, 86% felt that they were managing satisfactorily on a day-to-day basis. Yet, an examination of how well respondents were able to carry out daily activities essential to living independently revealed that some were having difficulty. To provide an overall picture of the respondents' ability to function, an index was created using the eight items in Table 3. While 29% reported no difficulty at all, 61% indicated some difficulty in carrying out at least one activity, and 10% had some difficulty or needed help with almost all the activities listed.

LINC was also designed to reach those who were vulnerable because they lacked an adequate support system. While the majority of respondents had a helping network, a considerable number were reached who reported the absence of support from either children, relatives, friends, or neighbors. As Table 4 illustrates, on the pre-test one-fourth of those sixty and older did not have living children. For 32%, relatives were not available to help in emergencies, while for 30% they were not a source of emotional support. It is also significant that 42% did not feel they had enough friends, and 48% wished for more contact with their friends.

As for neighbors, 14% felt they could not call on them for help in emergencies; 28% did not feel comfortable enough to visit their neighbors; 35% would have liked to get together with their neighbors more often; and 45% felt they could not share their feelings or troubles with their neighbors.

In sum, LINC reached the vulnerable, frail population it intended to serve.

The second evaluation question was: DID PARTICIPANTS DEVELOP A MORE POSITIVE PERCEPTION OF THEIR NEIGHBORHOOD AS A RESULT OF THEIR INVOLVEMENT?

When most participants joined LINC, they already had a positive perception of their neighborhood. Seventy-six percent felt that is was a good to excellent place in which to live. Sixty-eight percent felt somewhat to very much part of their neighborhood, and 85% indicated that they would be sorry to very sorry if they had to move. Thus, it is not surprising that respondents' perceptions of their neighborhood on these variables did not significantly change.

The third question was: DID LINC INCREASE PARTICIPANTS' NEIGHBOR AND FRIENDSHIP NETWORKS?

As Table 5 illustrates, 85% of the respondents met new people through their participation in the project. Six was the median number of new contacts reported. Almost half saw these new contacts as being available to help them in emergencies. Similarly, almost half felt they could visit with these newly met neighbors, and one-third felt that the relationship was such that they could share their feelings and troubles with them.

Respondents were also asked about their relationship with friends. As Table 6 illustrates, no change was registered in their perception of whether or not they got together with friends as much as they would have liked. However, a statistically significant change was noted on the second item on the table. A number of those who stated they didn't have enough friends on the pre-test reported on the post-test that they now felt they had enough friends.

In sum, LINC increased opportunities for socialization by helping neighbors meet one another. For some, these new contacts contributed to the more positive perception that they now had enough friends.

The fourth question was: DID LINC STIMULATE THE EXCHANGE OF SERVICES AMONG NEIGHBORS?

Table 7 lists the type of services that neighbors could exchange.

As Table 8 documents, for seven services there was an increase in the number of respondents who were helping LINC members. These services were: transportation, picking up things at the store, regular calls or visits, conversations about personal concerns, looking after houses or apartments when neighbors were away, lending neighbors things, and assisting with small repairs. By the time of the post-test, 53% of the respondents had provided services.

Table 9 views respondents as recipients of services. By the time of the post-test there was an increase in the number of respondents reporting that LINC members helped them with transportation and emotional support. It should be noted that 68% of the respondents received services. Approximately half of them received between one and five services, and the other half received more than six services.

These findings indicate that LINC stimulated the exchange of services among neighbors.

However, because people who were not exchanging services at the time of the pre-test were not included in the analysis, the data in Tables 8 and 9 does not fully reflect the helping activities of all respondents.

The fifth and last question was: DID PARTICIPATION INCREASE LIFE SATISFACTION?

The Life Satisfaction Z scale was used to measure changes in respondents' perceptions of life satisfaction. As Table 10 documents, participants' life satisfaction scores increased during the course of their involvement with the project.

When this finding was analyzed for the sub-groups within the sample, an interesting pattern emerged. As Table 11 reveals, a statistically significant increase in life satisfaction was registered for only the older participants--those 60 and over. In contrast, although those under sixty began with a higher life satisfaction score than the older group, their scores did not increase over the course of their involvement with the project.

Health was also a factor in respondents' perceptions of life satisfaction. Those in good health had relatively high satisfaction scores to begin with, and their perceptions remained constant throughout their involvement with LINC. A statistically significant improvement in life satisfaction was recorded, however, for those in poorer health. Their mean scores increased on the post-test.

In sum, not only did LINC contribute to an increase in respondents' life satisfaction, but these gains were most notable for the more vulnerable elderly and those in poorer health.

Conclusion

LINC concluded its demonstration period at the end of September 1980 and is being continued and expanded by the San Fernando Valley Interfaith Council, an organization that carries administrative responsibility for the senior centers in the Valley.

TABLE 1

Sociodemographic Profile by Age

	N=30 Younger Participants (Under 60) %	N=90 Older Participants (60 & Over) %
1. Race/Ethnicity		
White	88.9	100
Minority	10.1	
2. Marital Status		
Married	70.0	37.8
Widowed	3.3	46.7
Single/divorced/never married	26.6	15.5
3. Sex		
Male	20.0	24.4
Female	80.0	75.6
4. Living Arrangements*		
Lives alone	10.0	43.3
Lives with other(s)	89.7	47.8
5. Education	13.4	53.3
High school or less	56.7	33.3
Some college	20.0	11.1
College graduate	10.0	2.2
Masters/doctorate		
6. Employment Status*		
Retired	4.0	61.1
Employed	80.0	15.6
Unemployed	4.0	2.2
Homemaker	8.0	20.0
7. Occupation*		
Professional/managerial	50.0	32.2
Sales/clerical	26.7	28.9
Skilled	10.0	15.6
Unskilled	10.0	16.7

*Percentages do not total 100 because data is missing.

TABLE 2

Health Status and Coping Ability of Respondents 60 & Over

	(N = 90) %	
1. Overall Health*		
Fair to very poor	45.5	
Good	37.8	
Excellent	14.4	
2. Compared to a year ago, how well are you managing?*		
Not as well	24.4	
Same	57.8	
Better	15.6	
3. How well are you managing?*		
Not well	12.2	
Well enough	46.7	85.6%
Very well	38.9	

*Percentages don't add to 100 because of missing values.

Table 3

Functional Ability of Respondents 60 & Over

Index of Ability to Function*	(N = 90) %
No difficulty	29
Some difficulty	61
Need help	10

*The scores ranged from 8, indicating no difficulty, to 24, indicating needs help on all items.

Activities of Daily Living*	(N = 90) Extent of Difficulty in Performing		
	None	Some	Need Help
	%	%	%
Prepare own meals	75.6	16.7	6.7
Do own housework	54.4	18.9	25.6
Do own laundry	71.1	11.1	15.6
Shop for groceries	62.2	16.7	20.0
Go for a walk	72.2	14.4	12.2
Walk up/down stairs	58.9	30.0	10.0
Dress self	91.1	6.7	1.1
Bathe self	86.7	6.7	5.6

*Percentages do not sum to 100 because one person did not respond.

Table 4

Informal Support Systems of LINC Participants

Children (of those 60 & over)*	(N = 68)[a] Yes %	No
Can call on for help in emergencies	88.2	10.3
Close relationship	83.8	14.7
See enough	38.2	58.8

Relatives*	(N = 120) Yes %	No
Call on for help in emergencies	67.5	31.7
Share feelings & troubles with	69.1	30.0
Get together with enough	29.3	54.2

Friends*	(N = 120) Yes %	No
Can call on for help in emergencies	75.8	24.2
Can share feelings & troubles with	83.4	15.8
Have enough	57.5	41.7
See enough	49.2	47.5

Neighbors*	(N = 120) Yes %	No
Can call on for help	85.0	14.2
Know well enough to visit with them	70.8	27.5
See enough	62.5	35.0
Can share feelings & troubles with	55.0	45.0

*Percentages don't add to 100 because of missing data

[a]24.4% had no living children

TABLE 5

Involvement with Neighbors: Post-Test Assessment

	(n = 101) % Yes
Did you meet new people through LINC?	85
Could you call on these people for help in emergencies?	47.8
Do you know these people well enough to visit with them in their homes?	44.6
Do you know these people well enough to share your feelings and troubles with them?	34.7

TABLE 6

Respondents' Neighbor & Friendship Network: A Pre-Post-Test Comparison

	Pre-Test Mean	Post-Test Mean	t	D.F.	1 tail Prob.	N
1. Get together with friends	2.46	2.48	-.33	97	.371	97
2. Have enough friends	1.61	1.74	-2.24	99	.014*	100

*significant at the .05 level

TABLE 7

Services to be Exchanged

1. Look after the house or apartment when you were away
2. Lend you things
3. Receive packages for you
4. Let in a repair person
5. Pick up things at the store
6. Help with small repairs around the house
7. Help with the yard work
8. Sew or mend for you
9. Help with light housework
10. Babysit for you
11. Provide transportation to the store, doctor, etc.
12. Prepare a meal
13. Sit with a sick family member so you could get out
14. Stop by or call regularly to see how you were doing
15. Talk with you about your personal concerns

Other (animal care, letter writing, make phone calls, etc.)_____

_____

TABLE 8

Number of Respondents Donating Services to LINC Members:
A Pre-Post-Test Comparison

Type of Service	Pre-test mean	Post-test mean	t	df	1 tail prob.	N
1. Provide transportation to store, doctor, etc.	1.07	1.52	-3.82	28	.000*	29
2. Pick up things at the store	1.08	1.20	-1.71	39	.048*	40
3. Stop by or call regularly to see how they were doing	1.09	1.27	-2.63	54	.006*	55
4. Talk with them about personal concerns	1.02	1.26	-3.63	57	.000*	58
5. Look after house or apartment when away	1.02	1.67	-3.04	53	.002*	54
6. Lend them things	1.02	1.10	-1.66	49	.052*	50
7. Help with small repairs	1.00	1.44	-2.53	8	.018*	9

*Statistically significant at the .05 level.

TABLE 9

Number of Respondents Receiving Services from LINC Members:
A Pre-Post-Test Comparison

Type of Service	Pre-test mean	Post-test mean	t	df	1 tail prob.	N
1. Provide transportation to store, doctor, etc.	1.08	1.54	-2.52	12	.014*	13
2. Talk with you about your personal concerns	1.00	1.32	-4.16	36	.000*	37

*Statistically significant at the .05 level.

TABLE 10

Respondents' Perceptions of Life Satisfaction:
A Pre-Post-Test Comparison

	Pre-test mean	Post-test mean	t	df	1 tail prob.	N
Life Satisfaction	16.81	17.32	-1.63	97	.053*	98

*Statistically significant at the .05 level.

TABLE 11

Respondents' Perceptions of Life Satisfaction:
A Pre-Post-Test Comparison
by Age and Health

	Pre-test mean	Post-test mean	t	df	1 tail prob.	N
Under Sixty						
Life Satisfaction	17.58	17.25	0.45	23	.329*	24
Sixty and Over						
Life Satisfaction	16.55	17.34	-2.35	73	.011*	74
Good Health						
Life Satisfaction	18.20	18.23	-1.28	39	.104*	40
Poor Health						
Life Satisfaction	14.66	15.53	-1.89	31	.034*	32

*Statistically significant at the .05 level.